

<h1 style="margin: 0;">TRANSMITTAL FORM</h1> <p style="margin: 0;">(to be used for all correspondence after initial filing)</p>		Application Number		10/714,195							
		Filing Date		November 14, 2003							
		First Named Inventor		Joffre B. BAKER							
		Group/Art Unit		1634							
		Examiner Name		Shaw, Amanda Marie							
Total Number of Pages in This Submission				Attorney Docket Number		39740-0005A					
ENCLOSURES (check all that apply)											
<input checked="" type="checkbox"/> Transmittal Form <input checked="" type="checkbox"/> Fee Transmittal Form <div style="margin-left: 20px;"><input type="checkbox"/> Fee Attached</div> <input checked="" type="checkbox"/> Response to Office Action <div style="margin-left: 20px;"><input type="checkbox"/> After Final</div> <div style="margin-left: 20px;"><input type="checkbox"/> Version With Markings Showing Changes</div> <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53</div> <input type="checkbox"/> Copy of Notice				<input type="checkbox"/> Copy of an Assignment <input checked="" type="checkbox"/> Drawing(s) (Replacement Figs. 1, 2) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, by Assignee to Exclusion of Inventor Under 37 C.F.R. §3.71 With Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund				<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> ADDITIONAL ENCLOSURE(S) (PLEASE IDENTIFY BELOW): <input checked="" type="checkbox"/> Declaration of Joffre B. Baker, Ph.D. Under 37.C.F.R. § 1.132 (7pgs.)			
<input type="checkbox"/> Remarks				AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT 08-1641 FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER, REFERENCING ATTORNEY'S DOCKET NO. 39740-0005A.							
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT											
Firm or Individual name		HELLER EHRMAN LLP		LESLIE A. MOOI (Reg. No. 37,047)							
		275 Middlefield Road, Menlo Park, California 94025		Telephone: (650) 324-7000		Facsimile: (650) 324-0638					
Signature											
Date		December 21, 2006		Customer Number:		25213					

FILED via EFS

Typed or printed name		Kathleen K. Muto	
Signature			Date
			December 21, 2006

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop ____, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

COMBINED FEE TRANSMITTAL for FY 2006

Effective 12/08/2004. Patent fees are subject to annual revision.

PTO/SB/17 (12-04) (Revised) (For payment of 37 CFR 1.17 fees including (f), (g), (h), & (i))

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT \$510.00

Complete if Known

Application Number	10/714,195
Filing Date	November 14, 2003
First Named Inventor	Joffre B. BAKER
Examiner Name	Shaw, Amanda Marie
Art Unit	To be assigned
Attorney Docket No.	39740-0005A

METHOD OF PAYMENT (check one)

☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None
☒ Deposit Account

Deposit Account Number: 08-1641 (Ref. Atty. Docket No. 39740-0005A)

Deposit Account Name: Heller Ehrman LLP

The Commissioner is authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☒ Credit any overpayments and charge any deficiencies

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the deposit account

FEE CALCULATION (continued)

4. PETITION FEES UNDER 37 CFR 1.17 (f) Fee P
Fee Code: 1462 Fee \$ 400 For petitions filed under:
§ 1.53(e); § 1.57(a); § 1.182; § 1.183; § 1.378(e); § 1.741(b)

5. PETITION FEES UNDER 37 CFR 1.17 (g) Fee P
Fee Code: 1463 Fee \$ 200 For petitions filed under:
§ 1.12; § 1.14; § 1.47; § 1.59; § 1.103(a); § 1.136(b); § 1.295; § 1.296; §
1.377; § 1.550(c); § 1.956; § 5.12; § 5.15; § 5.25

6. PETITION FEES UNDER 37 CFR 1.17 (h) Fee P
Fee Code: 1464 Fee \$ 130 For petitions filed under:
§ 1.19(g); § 1.84; § 1.91; § 1.102(d); § 1.138(c); § 1.313; § 1.314

7. PROCESSING FEES UNDER 37 CFR 1.17 (i) Fee P
Fee Code: 1808 (1803 for § 1.221) Fee \$ 130 For petitions filed under:
§ 1.28(c)(3); § 1.41; § 1.48; § 1.52(d); § 1.53(b)(3); § 1.55; § 1.99(e); §
1.103(b); § 1.103(c); § 1.103(d); § 1.217; § 1.221; § 1.291(c)(5); §
1.497(d); § 3.81

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Applicati on Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Entity Fee (\$)	Small Entity Fee (\$)	Entity Fee (\$)	Small Entity Fee (\$)	Entity Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	135	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

SUBTOTAL (1)

2. EXTRA CLAIM FEES

Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
50	25	Each claim in excess of 20 or, for Reissues, each claim in excess of 20 and more than in the original patent
200	100	Each Independent claim in excess of 3 or, for Reissues, each independent claim more than in the original patent
360	180	Multiple dependent claim, if not already paid

Extra Claims		Fee from above	Fee Paid	
Total Claims	20	-20=	0	x 25 =
Independe nt Claims	3	-3**=	0	x 100 =

**or number previously paid, if greater; For Reissues see below

Multiple Dependent 360.00 = 0

SUBTOTAL (2) 0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof (round up to the a whole number). See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50	Fee (\$)	Small Entity Fee (\$)
	-100 =	/50 =	x 250 OR	x 125

SUBTOTAL (3) \$ 0

8. OTHER FEES

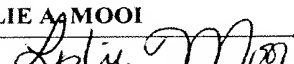
Entity Fee (\$)	Entity Fee (\$)	Fee Description	Fee P.
130	65	Surcharge - late filing fee or oath	
50	25	Surcharge - late provisional filing fee or cover sheet	
130	130	Non-English specification	
2,520	2,520	For filing a request for <i>ex parte</i> reexamination	
920*	920*	Requesting publication of SIR prior to Examiner action	
1,840*	1,840*	Requesting publication of SIR after Examiner action	
120	60	Extension for reply within first month	
450	225	Extension for reply within second month	
1,020	510	Extension for reply within third month	510.0
1,590	795	Extension for reply within fourth month	
2,160	1,080	Extension for reply within fifth month	
500	250	Filing a brief in support of an appeal	
790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1,510	1,510	Petition to institute a public use proceeding	
500	250	Petition to revive - unavoidably abandoned application	
1,500	750	Petition to revive - unintentionally abandoned application	
50	50	Processing fee for provisional appls (37 CFR 1.17(q))	
180	180	Submission of Information Disclosure Statement	
1,000	500	Request for oral hearing	
790	395	For each additional invention to be examined (37 CFR 1.129(b))	
790	395	Request for Continued Examination (RCE)	
900	900	Request for expedited examination of a design application	

Other fee (specify)

SUBTOTAL (4+5+6+7+8) \$510.00

* Reduced by Basic Filing Fee Paid

SUBMITTED BY

Name (Print/Type)	LESLIE A MOOI	Registration No. (Attorney/Agent)	37,047	Complete (if applicable)	Telephone	650 324-7000
Signature		Date	December 21, 2006	Customer No.	25213	